PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN **SMALL ENTITY** (Column 1) (Column 2) TYPE [ OR NUMBER FILED NUMBER EXTRA **FOR** FEE FEE RATE RATE 690.00 345.00 **BASIC FEE** OR 2 minus 20= X\$18= **TOTAL CLAIMS** X\$ 9= OR 2 INDEPENDENT CLAIMS minus 3 = X78= X39 =OR MULTIPLE DEPENDENT CLAIM PRESENT +260= +130= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 690 TOTAL TOTAL OR OTHER THAN **CLAIMS AS AMENDED - PART II SMALL ENTITY** SMALL ENTITY OR (Column 3) (Column 2) (Column 1) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER **PRESENT** TIONAL TIONAL RATE RATE **PREVIOUSLY AFTER EXTRA AMENDMENT FEE** FEE PAID FOR **AMENDMENT** X\$18= Total Minus X\$ 9= OR Minus Independent X39 =X78= ÒR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER **PRESENT** TIONAL RATE TIONAL RATE **PREVIOUSLY AFTER EXTRA** ENDMENT FEE FEE AMENDMENT PAID FOR Minus Total X\$ 9= X\$18=OR Independent Minus X39 =X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR TOTAL TOTAL ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** TIONAL RATE TIONAL RATE **PREVIOUSLY AFTER EXTRA AMENDMENT PAID FOR** FEE AMENDMENT FEE Total Minus X\$18= X\$ 9= OR Minus Independent X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE \*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number

## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

	T. T. OH OHLE
APPLICATION NUMBER: 09	1115
TOWNER:	1612919

## Total Fee Calculation

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Total Claim; ≥20	205.105	12	X		·	- 600 D
Independent Claim; >;	202/(02	2			•	
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English Translation	139					130/45
TOTAL FEE CALCULATI	<u>() N</u>					
Fees due upan filing the s	laplus stura					<u>820</u>
Total Filing Fees Due =	٢	820			- -	*
Less Filing Fees Submined		0				
BALANCE DUE	= 5	820				
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Office of Initial Patent Exam	น่างเกา					
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